

Apr. 7 / Administration of William J. Clinton, 1994

ings to the Governing Council in its spring meeting, scheduled for May 1994.

U.N. Security Council Resolution 778 permits the use of a portion of frozen Iraqi oil assets to fund crucial U.N. activities concerning Iraq, including humanitarian relief, UNSCOM, and the Compensation Commission. (The funds will be repaid, with interest, from Iraqi oil revenues as soon as Iraqi oil exports resume.) The United States is prepared to transfer to a U.N.-managed escrow account up to \$200 million in frozen Iraqi oil assets held in U.S. financial institutions, provided that U.S. contributions do not exceed 50 percent of the total amount contributed by all countries. We have arranged a total of about \$113 million in such matching contributions thus far.

Iraq still has not met its obligations concerning Kuwaitis and third-country nationals it detained during the war. Iraq has taken no substantive steps to cooperate fully with the International Committee of the Red Cross (ICRC), as required by UNSCR 687, although it has received more than 600 files on missing individuals. We continue to work for Iraqi compliance.

Examples of Iraqi noncooperation and non-compliance continue in other areas. For instance, reliable reports indicate that the Government of Iraq is offering reward money for ter-

rorist acts against U.N. and humanitarian relief workers in Iraq. The offering of bounty for such acts, as well as the commission of such acts, in our view, constitute violations of UNSCRs 687 and 688. In the latest series of attacks on the international relief community, there were two incidents in which members of the U.N. Guard Contingent in Iraq were shot and seriously wounded in March 1994.

As I stated in my last report to you on this issue, Iraq can rejoin the community of civilized nations only through democratic processes, respect for human rights, equal treatment of its people, and adherence to basic norms of international behavior. Iraq's government should represent all Iraq's people and be committed to the territorial integrity and unity of Iraq. The Iraqi National Congress (INC) espouses these goals, the fulfillment of which would make Iraq a stabilizing force in the Gulf region.

I am grateful for the support by the Congress of our efforts.

Sincerely,

WILLIAM J. CLINTON

NOTE: Identical letters were sent to Thomas S. Foley, Speaker of the House of Representatives, and Robert C. Byrd, President pro tempore of the Senate.

Remarks at a Rally for Health Care Reform in Minneapolis, Minnesota *April 8, 1994*

Wow! What a crowd. Thank you for coming this morning. Thank you for supporting health care. I want to thank Mary Ellen for that wonderful speech. She really left nothing for me to say. But she and the nurses of Minnesota have my undying gratitude for this wonderful rally and for their commitment to your health care and to the future of American health care. I want to thank Senator Wellstone and Congressman Sabo, who's done a wonderful job in his new leadership position, helping us to get a budget through that will drive down the deficit and still increase investment in the things that help America to grow and prosper. I thank you, Mayor Sayles, for being here. And I want to thank the others in the audience who are good friends and supporters of mine, especially Con-

gressman Bruce Vento, who is also a strong supporter of health care reform; your secretary of state, Joan Crowe; your State treasurer, Mike McGrath; my good friend Skip Humphrey, your attorney general; and the Mayor of St. Paul, Norm Coleman. Thank you all for being here. I also couldn't come to Minneapolis today without saying a special word of gratitude for the extraordinary service being rendered to the United States of America under what you now know are difficult circumstances by our Ambassador to Japan, Vice President Fritz Mondale.

I am honored to be here today under the sponsorship of the nurses of Minnesota. I thank them for doing this. I also want to say that

I'm very grateful for the people from Heightman Properties, who made it possible for us to meet inside instead of outside today. At least for me, it's not springtime yet. The remarks that Mary Ellen made in introducing me speak more eloquently than I ever could to what millions of American nurses know are the facts of life in health care in this country.

I ran for President because I thought that Washington had become a place where there was too much rhetoric and too little reality, where every statement that every person made was automatically pushed to its ultimate extreme: "The Government can do nothing; you're on your own," or "The Government can do everything; there's nothing for you to do." But real people and real life want us to come together as a people and figure out how to deal with our problems and seize our opportunities. And we have done our best there, in other words, to give the care to America's public life that the nurses of Minnesota give to their patients every day.

If you look at what's happened in the last year, there has been a pretty big change in the way things work in Washington. For a dozen years people talked about the deficit, and the national debt tripled. Well, last year this Congress, working with me, adopted a budget that brought the deficits down, interest rates down, has helped to create 2.5 million new jobs in this economy, more than were created in the previous 4 years. We're on the way.

The Congress is on a record pace to adopt a new budget which, if it is adopted, will eliminate 100 Government programs, cut 200 others but increase spending in education, in Head Start, in defense conversion, in the new technologies for the 21st century, in educating and training our people, and give us the first 3 years of declining Government deficits since Harry S. Truman was the President of the United States of America.

Already this year, the Congress has passed an education bill called Goals 2000 which for the very first time in the history of this country establishes national standards for world-class education and promotes the kind of grassroots reforms that Minnesotans have been experimenting with for a decade to see that we meet those standards everywhere in the country for all of our children.

And when the Congress comes back, they will take up a bill designed to help all the young

people who don't go to college to at least get a year or two of further training after high school so they, too, can have good jobs and good skills in the global economy. And they will take up a bill that will completely reorder the unemployment system to make it a reemployment system, because people often don't get the job they lose back anymore; they have to find new jobs. And now, from the first day an American is unemployed, he or she should be eligible from day one for new training and new job search and new opportunities. We're going to change that unemployment system this year.

The Congress will take up a crime bill designed to make us not only tough but smart, for a change, with crime. It puts another 100,000 police officers on the street in community policing in models that have proven—proven—effective at lowering the crime rate. It takes 28 kinds of assault weapons off the streets and out of the hands of gangs. And if we do it the right way instead of the wrong way, the Congress will pass a bill increasing penalties for violent offenders so that we recognize that a relatively small number of our fellow citizens create a very high percentage of the seriously violent crimes. We have more people behind bars, as a percentage of our population, than any country in the world, and yet we continue to let the wrong people out from time to time. It's time we found alternatives to imprisonment for young people and kept the people behind bars who should stay there. We can do that if we do it intelligently.

Now, why is this happening? It's happening partly because people like Paul Wellstone and Martin Sabo and Bruce Vento last year were willing to risk their political necks to make tough decisions, to stop talking about problems and start doing something about them. But it's happening also because the American people say, "Look, we are tired of gridlock. We are tired of paralysis. We are tired of rhetoric over reality. We want you all in Washington to conduct your business the way we conduct our business at home: identify the problems, identify the opportunities, seize the opportunities, and beat back the problems. Show up for work every day." It's pretty simple what our strategy is: get people together, get things done, move the country forward, give people the chance to live up to their potential.

And now we are being called upon to face one of the greatest challenges of this age. For

decades and decades, the American people have been denied something that every other advanced country provides to its citizens, the security of knowing that they have good health care that is always there. Every other country with which we compete with an advanced economy has solved this problem. Only the United States, time after time after time after time, has found it impossible to do. For 60 years, whenever we came to the point when it looked like we could deal with the health care problems, at times when it was much simpler than it is today, when the money at stake was much lower than is at stake today, always, always fear overcame hope, entrenched interest overcame the public interest. Today I can tell you that we are going to make 1994 different. We can provide health security for all Americans this year, and I believe that we will.

My fellow Americans, in Washington this may look like a partisan issue, but out here on Main Street it isn't. Democrats and Republicans and independents all get sick. They all lose their jobs. They all lose their health insurance. There are 39 million Americans who don't have any health insurance now for a whole year. In any given year there are 58 million Americans at some time during the year, more than one in 5 of us, who will be without health insurance.

There are 81 million of us, more than one in 4, who are in families where we've had someone with what the insurance companies call a preexisting condition, a child with diabetes, a mother with breast cancer, a father who had a premature heart attack, people who have to continue working but who either can't get insurance, pay more than they should, or can never change the job they're in because someone in their family has been sick.

There are 133 million Americans who have lifetime limits on their insurance policies, so if, God forbid, they should give birth to a child with a serious illness they could run out of health care at the very time they need it the most.

There are people who change jobs in an era when—look at all these young people in this audience today—the average 18-year-old will change work seven or eight times in a lifetime. And yet it is usual in America for people to have to wait months and months and months to get health insurance coverage.

The good people of Minnesota know we can do better. You know that if there is a Mayo

Clinic which can provide world-class health care at lower cost than many Americans pay for something which at least you could say is not better and they wish were as good, we can do better. You know that there is no reason in the wide world to permit Americans to be in this condition, to permit most Americans—those who don't work for secure big companies or the Government, I don't care who they are, are just an illness or an economic failure away from losing their health care.

And we now have an economy in which we're desperately trying to preserve life in rural America, and more and more and more, there are no doctors in rural America. I was in rural North Carolina the other day, and I met a woman physician who told me she had worked for months on end over 100 hours a week. And she was now in her slow season where she was down to 80 hours a week because there are no doctors. We know we can do better than that. We know we can.

So the question is, why haven't we done it? Well, there are a lot of people who don't trust the Government in America to do anything. They think we'd mess up a one-car parade. [Laughter] And frankly, from time to time, I've been in that crowd, and so have you. We do not propose—there's not a single solitary proposal in the Congress that would have the Government take over the health care providers of this country. And don't you believe that. We've got the best doctors, the best nurses, the best health care providers, the best medical research, the best medical technology in the world. What we also have is the absolutely worst financing system for health care in the world. It is the way it is financed that is killing us.

For all the people who tell you that if we reform health care it will make it more bureaucratic, let me just ask you, go talk to one doctor and ask a doctor how much time the people in his or her clinic spend on the telephone to insurance companies talking to employees who don't know a lick about health care, trying to get approval for a procedure which is obvious and clear. Ask a nurse, ask any trained nurse who works in a clinic or a hospital how much time he or she spends filling out paper instead of taking care of patients because of the system we have.

It is conservatively estimated that we spend at least a dime on a dollar more on the administrative cost of health care than any other nation

in the world. That is \$90 billion we spend, because we have 1,500 separate companies doing insurance plus the Government doing Medicare for the elderly and Medicaid for the poor, writing thousands and thousands of different policies, insuring zillions of small groups of people, finding out—with all these hundreds of thousands of paperworkers in insurance companies and hospitals and in clinics—who's not qualified, who's not covered, what you can and can't reimburse for. Nobody else does this.

So we can't figure out how to cover all of our people, how to give people job security through health care security when we know they're going to have to change jobs. But we can figure out how to spend \$90 billion to hire people for the very frustrating work of second-guessing every decision the doctor and nurse makes and pushing paper around all day long. It is wrong, and we can do better.

You heard Senator Wellstone say so eloquently that what we have to do is provide coverage for all Americans. He favors a single-payer system; I favor guaranteed insurance. You can argue it flat around, depending on the experience of the two main models we have, Canada and Germany. But I'll tell you one thing, both of them have lower administrative costs, less paperwork, more freedom to practice medicine, more efficiency, and people have health care.

People should have insurance that they can never lose, not when they change jobs, not when they get sick, not when they're self-employed, and not when they get older. And they should have insurance that provides the right to choose their health care providers. I get tickled when these people attack all of us that are trying to change the health care system. They say, "Oh, they're going to ration health care." "Oh, they're going to take your choices away." My fellow Americans, more than half the people in America today who are insured in the workplace don't have a choice about their health care plan or their doctor. Ninety percent of the businesses that are providing health insurance who have 25 employees or less have no choice. And to be fair to them and to the insurance companies, they can't afford it under the present system. They're doing the very best they can under the present system. It is not a bunch of evildoers out there trying to keep people sick and insecure; it is a badly broken system. That is what is wrong, and we can do better.

Under our proposal, every American family, every year—every year—would have access to at least three choices. You could have access to an HMO of your choice or a professional provider organization of your choice or the right to choose your own doctor and continue fee-for-service medicine or the right to have a guaranteed health managed plan and still have the right to opt out when you want it for a specialist of your choice or your own doctor. Everybody would have those choices. And they would all be more affordable for most Americans than what they're stuck with now. We can do that if we had a system that was rational.

Choice is important, but you can't get there unless you change the rules of health care finance. If you want to have a system that works, you can't have people denied coverage or charged more because of preexisting conditions. What difference does it make? I have a stake as an American citizen in seeing you as a successful, effective worker, able to change jobs, able to grow in your job even if, God forbid, your spouse should get cancer or your kid should have a serious illness. That is my interest in your future. We all share that.

Insurance used to be that way. Everybody threw in; everybody paid; the risk was broadly spread. We can't have waiting periods anymore before there's coverage. We shouldn't have lifetime limits. We shouldn't deny coverage to people who need it most. And we shouldn't deny coverage by charging more for older people rather than younger people.

Let me tell you, we live in a world today where people are going to be losing their jobs well into their fifties and sixties and still have to find new jobs. I met a 59-year-old man the other day who worked for over 30 years in the defense industry, and because of the end of the cold war and the reduction of defense spending—which virtually all of us support and thank God for the opportunity to have a more peaceful world—this good man lost his job. He had to find a new job; he needed retraining. He was, thankfully, hired by a hospital for a rewarding job. But there are lots of people like him who will not be hired because the small businesses who could hire them, who know they're reliable workers because they're older, they're settled, they're experienced, also know that they will drive up their health insurance premiums because of their age. We do not need that; we cannot afford that.

We have a bizarre system in this country when, because of certain training and other problems, a lot of young people are discriminated against in the job market. They're told, "Well, you've got to have experience before we hire you." How do you ever get experience if you don't get a job? And then you have a lot of older people who don't get hired because even though they've got worlds of experience, their insurance is too high. We can overcome both of those things.

Another big problem for insurance is that small businesses and self-employed people pay, on average, 35 percent more than larger businesses and governments do because they have no bargaining power. So we have to reform that, too. We have to go back to what is called community rating, old-fashioned insurance, put people in big pools, spread the risk broadly, let us all share that. And then small businesses and self-employed people have to have the right to band together in buying co-ops so that they can get the same deal that those of us who work for the Federal Government do. I want for you what I've got and what we take for granted in Washington.

Now, there are a lot of people who say it's not fair to require all employers and employees to contribute to their own health care if they don't do it now. They say they can't afford it. But let me just remind you of this: When people in this country get real sick, they do get health care. It's too late; it's too expensive; they show up at the emergency room, then they pass the cost along to all the rest of us and our health care bills go up. What about the small businesses all over this country who are in competition with other small businesses? They cover their employees, and their competitors don't.

Nine of ten Americans who have health insurance that is private get it at work. Eight in ten Americans who don't have any health insurance at all are in working families. I think everybody should do their part, and I know we can do it without hurting small business. Our plan has discounts for small businesses, recognizing that not all can afford to pay as much as others. We know that that happens. Our plan gives 100 percent deductibility for self-employed people. Did you know that if you're self-employed in this country today, you can't deduct the entire cost of your health policy, but if you work for somebody else, you can? That's crazy. We fix that. We are not going to hurt small business;

we're going to help small business by controlling the exploding cost of health care and giving people a chance to get affordable health insurance.

And finally, let me say, I saw this up here on the—one of the wonderful signs. Our plan protects and preserves Medicare, but it also provides a prescription drug benefit and long-term care benefits to elderly people. And that is also very important. Let me tell you, folks, the fastest growing group of Americans are people over 80. The fastest growing group of Americans are people over 80. Many of them are bright, active, and vigorous. They don't want to be forced into a nursing home just because they may not be able to get along all on their own. We ought to reward their children who are willing to care for them at home and help them to get some respite care, help them to deal with these crises. We ought to reward the community providers who are willing to help elderly people stay in their communities.

And there is ample evidence that providing help for prescription medicine will save money immediately in the health care system by reducing hospitalization, especially for elderly people but also for the nonelderly, and strong evidence based on population trends that over the long run we are going to have to do something to help people deal with this long-term care crisis within the family and within the community. We cannot afford only to have nursing homes as an option, even though we need them where they are appropriate. We have to think of other things as well.

Now, I have been, in the last week, in North Carolina doing a health care forum in which I talked to people about health care and crime and other issues in Virginia and Tennessee and in Texas. Then yesterday I was down in Kansas City, and we talked to people in Kansas, Missouri, Oklahoma. And I'm here tonight to do one of these. Let me tell you what I find. I find that people really would like to know more about all these programs. They'd like to know honestly what the problems are. They know that there are tough decisions to be made. If this were an easy issue, somebody would have done it already and said, "Hey, vote for me. I solved this problem." This is a hard problem. That's why it's been pushed to the back.

But I think you hired me to deal with the hard problems. So we're trying to deal with them. And what I want to ask you today, all

of you here, these fine nurses who have endorsed what we're trying to do and all the rest of you, tell the Members of your congressional delegation to tone down the rhetoric and open their hearts and their eyes and their ears and listen and talk and explain this thing and work through the problems. And don't use this as yet another opportunity to take a proposal and push it to the ideological extremes, forgetting all about the reality of the tens of millions of people's lives that are at stake here. I plead with you.

Your wonderful State has been very good to me, from the time I came here in the primary when I just had a handful of friends, all the way through the general election. You've been wonderful to my wife when she's been out here on her health care crusade. You have been good to us, and I thank you for that.

But I ask you, tell the Members of your congressional delegation, without regard to their party, that you want this dealt with and you want it done now. We know enough; we know as much as we're ever going to know. And the longer we put it off, the worse it's going to be. It's going to be like an ingrown toenail.

[*Laughter*] It will not get better. This is a part of our growing and maturing as a nation, deal with the problems while we can deal with them, don't just let them get worse and worse and worse.

This is an opportunity for us to come together across regional and racial and income and party lines to do something that is good for America. All of our jobs are at stake, all of our health care at stake, our children are at stake, our parents are at stake. This need not be an issue that divides us.

But we are going to have to have a clear message from the American people that it will not be tolerated to do nothing, to walk away, to be divided, to have hot air, to turn it into a political issue. Tell the American people. Tell the Congress you want us to act and act now.

Thank you, and God bless you all. Thank you.

NOTE: The President spoke at 12:25 p.m. in the Crystal Courtyard at the IDS Tower. In his remarks, he referred to Mary Ellen Imdieke, president, Minnesota Nurses Association, and Mayor Sharon Sayles Belton of Minneapolis.

Remarks and an Exchange With Reporters in Minneapolis

April 8, 1994

Japan and Rwanda

The President. I wanted to mention a couple of things today. First, this morning, pretty early, I had a conversation with Prime Minister Hosokawa in which he told me that he was going to resign and that he hoped it would help the cause of political reform. He said he was very proud of the work that he had done in his term as Prime Minister in trying to promote reform within Japan and in trying to reform Japan's relationships with the United States and that he intended to keep working on that and that he hoped that I would continue to work on the Japanese-U.S. relationship with his successor.

I told him that I was personally very sorry to see him step down, that I thought he had provided amazing leadership to the people of Japan, and that he had made them believe in the possibility of change and that it could help

the people. And I thanked him specifically not only for his work in political reform but for opening the Japanese rice market for the first time in history and for engaging us on a lot of other issues and for his support in Korea and in a number of other areas. It was a good conversation, and I'm very grateful to him for that, for what he did.

Let me just mention one other thing, if I might. I called today the Secretary of State, the Secretary of Defense, and my National Security Adviser and had extended conversations with all three of them about the situation in Rwanda. And I want to mention it only because there are a sizable number of Americans there, and it is a very tense situation. And I just want to assure the families of those who are there that we are doing everything we possibly can to be on top of the situation, to take all appropriate steps to try to assure the safety of our